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PTO/SB/96 (08-03)

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(914) 333-9624

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as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).								
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:								
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KONINKLIJKE PHILIPS ELECTRONICS N.V. Groenewoudseweg l 5621 BA Eindhoven, The Netherlands								
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.								
SIGNATURE of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee								
Signatu	re //	May E. H.	laur		Date 14 Janua	ry 2005		
Name	Michae				Telephone (914)	333-9637		
Title	Author	ized Represent	ative					

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## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT, International Applications)

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ATTORNEY'S DOCKET NUMBER

PHNL030350 US

As a below named inventor, I h	ereby declare that:							
My residence, post office address and citizenship are as stated next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
the specification of which (check only one item below):								
is attached hereto.								
was filed as United States application								
Serial No								
on								
and was amended								
on								
x was filed as PCT international application								
Number PCT/IB2004/050402								
on								
and was amended under PCT Article 19								
on			(if applicable).					
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.								
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).								
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:								
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:								
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119					
Europe	03100938.4	8 April 2003	YES					
	211	DEPARTMENT OF COMMERCE -Paten	t and Tradomarka Office					

Attorneys Docket Number Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications) PHNL030350 US POWER OF ATTORNEY: As'a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) Direct Telephone Calls to: Jack E. Haken, Reg. No. 26,902 (name and telephone number) Michael E. Marion, Reg. 32,266 (914)332-0222 Edward M. Blocker, Reg. No. 30,245 **FULL NAME FAMILY NAME** FIRST GIVEN NAME SECOND GIVEN NAME 00 **LEURS** Frans Marie OF Jeroom **INVENTOR** STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE CITY 201 Heerlen The Netherlands NLX The Netherlands CITIZENSHIP POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY POST OFFICE CITY Jan Campertstraat 5 6416 SG Heerlen **ADDRESS** The Netherlands

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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DATE

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